



# Department of Medicaid

Mike DeWine, Governor  
Jon Husted, Lt. Governor

Maureen M. Corcoran, Director

## Medicaid Transmittal Letter (MTL) No. 3334-22-03

**TO:** Eligible Providers of Medicaid Services  
Chief Executive Officers, Managed Care Plans (MCPs)

**FROM:** Maureen M. Corcoran, Director

**SUBJECT:** Telehealth rule updates

### Summary

Effective July 15, 2022, rule 5160-1-18, entitled “Telehealth” has been amended by the Ohio Department of Medicaid. This rule expands upon the many services implemented in an emergency response to the COVID-19 pandemic and the State of Emergency declared by Ohio Governor, Mike DeWine. This rule continues to provide definitional information, eligible rendering and billing providers, covered telehealth services, provider responsibilities and key guidelines for submission and payment of telehealth claims. This rule amendment expands covered telehealth services to include additional behavioral health services, and new services to expand pregnancy education and diabetes management. The office or other outpatient visits for the evaluation and management of new patients, straightforward medical decision making (10 min) service has been deleted by the American Medical Association. Appendix A has been updated with procedure codes that have been added or removed.

This rule provides the codes and modifiers that must be submitted on claims and identifies where fee schedules may be found for the services and provider types included in this rule. This amended rule continues to provide claim requirements including a “GT” modifier, a place of service code that reflects the physical location of the treating practitioner, and a modifier as identified in the appendix to reflect the physical location of the patient, when applicable. At this time, place of service codes “02” and “10” will not yet be recognized by ODM unless otherwise stated in the Telehealth Billing Guidelines found here: <https://medicaid.ohio.gov/resources-for-providers/billing/billing>

We anticipate opening this rule again in the coming months to update other telehealth program components to best address Medicaid member needs when the PHE ends.

As of 7/15/2022: Rule 5160-1-18, entitled “Telehealth,” is expanded to include the following changes:

- Appendix A contains a list of procedure codes available for telehealth. Additional services may be eligible for telehealth if authorized in other rules adopted by ODM. The list of services eligible for payment when provided through telehealth is expanded to include the following services:
  - o G0108 – Individual diabetes management training
  - o G0109 - Group setting diabetes management training
  - o S9436 - Childbirth prep/Lamaze classes
  - o S9437 - Childbirth refresher classes

- S9444 - Baby parenting classes
  - S9447 - Infant safety training
  - S9452 - Prenatal nutrition classes
  - S9453 - Smoking cessation classes
  - S9470 - Prenatal nutrition counseling
  - 99401 and 99402 - Preventive medicine counseling
  - H2000 - Child Adolescent Needs and Strengths (CANS) assessments
- Additional behavioral health services eligible for payment when provided through telehealth by OhioMHAS certified providers is also expanded to include the following (see BH provider manual for additional information: <https://bh.medicaid.ohio.gov/manuals>):
- S9485 - Mobile Response Stabilization Services, initial response
  - S9482 - Mobile Response Stabilization Services, stabilization
  - S9484 - Mobile Response Stabilization Services, follow-up
  - 99415-99417 and G2212 - Prolonged evaluation and management visits
- This rule amendment also expands telehealth services eligible for payment to include any other services specifically authorized in rules promulgated under agency 5160 of the Administrative Code.
- The following service has been removed per guidance from the American Medical Association:
- 99201 - Office or other outpatient visit for the evaluation and management of a new patients, straightforward medical decision making (10 min)
- The following service has been removed as it will be an OhioRISE only service as of 7/1/2022:
- H2015 – Intensive Home-Based Treatment (IHBT)
- Appendix B contains the list of modifiers used to identify patient location when applicable
- This does not apply to OhioMHAS certified providers as described in 5160-27-01.
  - ODM will not be recognizing new CMS place of service codes “02” or “10” at this time unless otherwise stated in the Telehealth billing guidelines.

## **Access to Rules and Related Material**

The main Ohio Department of Medicaid (ODM) web page includes links to valuable information about its services, programs, and rules; the address is <http://www.medicaid.ohio.gov>

## **Additional Information**

Questions pertaining to this letter should be addressed to:

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